

Please type a plus sign (+) inside this box →

09-27-01

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**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

Only for new nonprovisional applications under 37 CFR 1.53(b)

Attorney Docket No.

LFS-123

First Inventor

EYSTER ET AL.

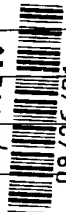
Title

Colorimetric Test Device with Reduced Error

Express Mail Label No.

EL691442545US

046 U.S. PRO  
09/963243



**APPLICATION ELEMENTS**

**ADDRESS TO:** Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(submit an original and a duplicate for fee processing)

2. ☐ Applicant claims small entity status.

3. ☒ Specification [Total Pages 12]

(Preferred arrangement set forth below)

- Descriptive Title of the Invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. ☒ Drawing(s) (35 USC 113) [Total Sheets 4]

5. Oath or Declaration [Total Pages 3]

a. ☒ Un-executed (original or copy)

b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 18 completed)

i. ☐ **DELETION OF INVENTOR(S)**

Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)

a. ☐ Computer Readable Form (CRF)

b. ☐ Specification Sequence Listing on:

i. ☐ CD-ROM or CD-R (2 copies); or

ii. ☐ paper

c. ☐ Statement verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9. ☐ Assignment Papers (cover sheet & document(s))

10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney  
(when there is an assignee)

11. ☐ English Translation Document (if applicable)

12. ☒ Information Disclosure Statement

(IDS)/PTO-1449 ☒ Copies of IDS Citations

13. ☐ Preliminary Amendment

14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)

15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)

16. ☐ Request and Certifications under 35 U.S.C. 122  
(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.

17. ☐ Other

18. ☐ If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-Part (CIP) of prior application No.: , filed

Prior application information: Examiner Group Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

☒ Customer Number or Bar Code Label **000027777** or ☐ Correspondence Address below

Name: Philip S. Johnson, Esq.

Address: Johnson & Johnson  
One Johnson & Johnson Plaza  
New Brunswick, NJ 08933-7003 USA

**20. TELEPHONE CONTACT**

Please direct all telephone calls or telefaxes to Lois A. Gianneschi at:

Telephone: (732) 524-6351 Fax: (732) 524-2808

**21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

NAME

Lois A. Gianneschi

Reg. No. 35519

SIGNATURE

DATE

September 26, 2001

09/26/01

09/26/01 09/26/01

<b>FEE TRANSMITTAL</b>	<i>Complete if Known</i>	
	Application Number	
	Filing Date	
	First Named Inventor	EYSTER ET AL.
	Group Art Unit	
	Examiner Name	
	Attorney Docket Number	LFS-123

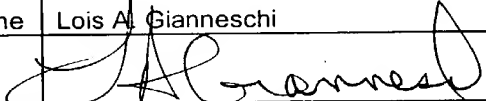
## FEE CALCULATION

### CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$710.00
TOTAL CLAIMS	18 - 20 =	0	x 18.00	\$ 0.00
INDEPENDENT CLAIMS	2 - 3 =	0	x 80.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS	<input checked="" type="checkbox"/>	N/A	\$270.00	\$270.00
			<b>TOTAL FEES</b>	<b>\$ 980.00</b>

## METHOD OF PAYMENT

- ☒ Please charge Deposit Account No. 10-0750/LFS123/LG in the amount of \$980.00. Three copies of this sheet are enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/LFS123/LG. Three copies of this sheet are enclosed.

<b>SUBMITTED BY:</b>		<i>Complete (if applicable)</i>
Typed or Printed Name	Lois A. Gianneschi	Reg. No. 35519
Signature		<b>Deposit Account No. 10-0750</b>
	Date: 9/26/01	

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j1054 U.S. PTO  
09/26/01

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[illegible]

Date of Deposit: September 26, 2001

I hereby certify that this complete application, including specification pages, claims, formal drawings, un-signed Declaration and Power of Attorney, and Information Disclosure Statement, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Washington, D.C. 20231.

A Combined Declaration and Power of Attorney will be submitted to the United States Patent and Trademark Office upon receipt of the U.S. Serial Number for this patent application.

(Typed or printed name of person mailing paper or fee)

*Diane Kest*